

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 03, 2008 8:00 am**  
**Secretary of State**

03-03-2008 90400 025 \*\*\*138.75

DOCUMENT # M00000002436

1. Entity Name  
HBK SORCE INSURANCE LLC



Principal Place of Business

3838 TAMiami TRAIL N  
STE 200  
NAPLES, FL 34103

Mailing Address

7680 MARKET ST.  
YOUNGTOWN, OH 44512

**DO NOT WRITE IN THIS SPACE**



02182008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number  
34-1925724

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BAER, DAN E CPA  
HILL, BARTH & KING LLC, TRIANON CENTRE  
3838 TAMiami TRAIL NORTH STE 200  
NAPLES, FL 34103

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGR  
HBK SORCE FINANCIAL LLC  
7680 MARKET STREET  
YOUNGSTOWN, OH 44512

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
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CITY - ST - ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2-21-08

330-758-8613

Date

Daytime Phone #